




<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <div style="border: 1px solid black; padding: 2px; text-align: center;">35.C13719</div>																				
		First Named Inventor or Application Identifier <div style="border: 1px solid black; padding: 2px; text-align: center;">KENJI SUZUKI, ET AL.</div>																				
		Express Mail Label No. <div style="border: 1px solid black; height: 20px;"></div>																				
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																				
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small></div> <div>2. <input checked="" type="checkbox"/> Specification <div style="float: right;">Total Pages <div style="border: 1px solid black; padding: 0 10px;">20</div></div></div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <div style="float: right;">Total Sheets <div style="border: 1px solid black; padding: 0 10px;">2</div></div></div> <div>4. <input checked="" type="checkbox"/> Oath or Declaration <div style="float: right;">Total Pages <div style="border: 1px solid black; padding: 0 10px;">2</div></div><div style="margin-top: 10px;">a. <input type="checkbox"/> Newly executed (original or copy)</div><div>b. <input checked="" type="checkbox"/> Unexecuted for information purposes</div><div>c. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small></div><div style="margin-left: 20px;">i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></div><div>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4c is checked) <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small></div></div>	<div>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</div> <div>7. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><div style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Copy</div><div>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</div><div>c. <input type="checkbox"/> Statement verifying identity of above copies</div></div>	<div>1542 U.S. PTO</div> <div style="font-size: 24px; font-weight: bold;">09/365510</div> <div style="font-size: 12px;">08/02/99</div> 																				
<b>ACCOMPANYING APPLICATION PARTS</b> <div>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; documents)</div> <div>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></div> <div>10. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>12. <input checked="" type="checkbox"/> Preliminary Amendment</div> <div>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></div> <div>14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application <small>Status still proper and desired</small></div> <div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></div> <div>16. <input type="checkbox"/> Other: _____</div>																						
<b>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:</b> <div style="display: flex; justify-content: space-between; align-items: flex-start;"><div><input type="checkbox"/> Continuation</div><div><input type="checkbox"/> Divisional</div><div><input type="checkbox"/> Continuation-in-part (CIP)</div><div>of prior application No. ____/____</div></div>																						
<b>18. CORRESPONDENCE ADDRESS</b>																						
<div style="display: flex; justify-content: space-between; align-items: center;"><div><input checked="" type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px solid black; padding: 2px; text-align: center;">05514</div><small>(Insert Customer No. or Attach bar code label here)</small></div><div>or <input type="checkbox"/> Correspondence address below</div></div>																						
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20%;">NAME</td><td colspan="4"></td></tr><tr><td>Address</td><td colspan="4"></td></tr><tr><td>City</td><td style="width: 20%;">State</td><td style="width: 20%;">Zip Code</td><td colspan="2"></td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td><td colspan="2"></td></tr></table>			NAME					Address					City	State	Zip Code			Country	Telephone	Fax		
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	6-20 -	0	X \$ 18.00 -	\$ 00.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 -	0	X \$ 78.00 -	\$ 00.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$260.00 -	\$ 00.00
				BASIC FEE (37 CFR 1.16(a))	\$ 760.00
	Total of above Calculations -				\$ 760.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL -				\$ 760.00

19. Small entity status


- a. ☐ A Small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

20. ☒ A check in the amount of \$ 760.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Mark A. Williamson, Reg. No. 33,628
SIGNATURE	
DATE	August 2, 1999